

HALES CORNERS CARE CENTER

9449 W FOREST HOME AVE

HALES CORNERS 53130 Phone:(414) 529-6888

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/04): 62

Total Licensed Bed Capacity (12/31/04): 62

Number of Residents on 12/31/04: 61

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 59

Corporation

Skilled

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)	
							%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	45.9
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years	34.4
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years	19.7
Day Services	No	Mental Illness (Org./Psy)	44.3	65 - 74	6.6		-----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	36.1		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	49.2	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.6	95 & Over	8.2	Full-Time Equivalent	
Congregate Meals	No	Cancer	1.6		-----	Nursing Staff per 100 Residents	
Home Delivered Meals	No	Fractures	11.5		100.0	(12/31/04)	
Other Meals	No	Cardiovascular	3.3	65 & Over	100.0	-----	
Transportation	No	Cerebrovascular	18.0		-----	RNs	13.0
Referral Service	No	Diabetes	4.9	Gender	%	LPNs	12.0
Other Services	Yes	Respiratory	4.9		-----	Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	9.8	Male	16.4	Aides, & Orderlies	
Mentally Ill	No	-----	-----	Female	83.6	44.8	
Provide Day Programming for			100.0		-----	-----	
Developmentally Disabled	No				100.0	-----	

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	3	15.8	157	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	4.9	
Skilled Care	14	100.0	250	16	84.2	135	0	0.0	0	28	100.0	218	0	0.0	0	0	0.0	0	58	95.1	
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	14	100.0		19	100.0		0	0.0		28	100.0		0	0.0		0	0.0		61	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	0.7	Bathing	3.3	82.0	14.8	61
Private Home/With Home Health	0.0	Dressing	3.3	82.0	14.8	61
Other Nursing Homes	5.6	Transferring	6.6	77.0	16.4	61
Acute Care Hospitals	90.1	Toilet Use	6.6	77.0	16.4	61
Psych. Hosp.-MR/DD Facilities	0.0	Eating	50.8	23.0	26.2	61
Rehabilitation Hospitals	0.0	*****				
Other Locations	3.5					
Total Number of Admissions	142	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	6.6	Receiving Respiratory Care		13.1
Private Home/No Home Health	18.6	Occ/Freq. Incontinent of Bladder	44.3	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	23.6	Occ/Freq. Incontinent of Bowel	42.6	Receiving Suctioning		0.0
Other Nursing Homes	0.0			Receiving Ostomy Care		0.0
Acute Care Hospitals	16.4	Mobility		Receiving Tube Feeding		4.9
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	6.6	Receiving Mechanically Altered Diets		45.9
Rehabilitation Hospitals	0.0					
Other Locations	20.0	Skin Care		Other Resident Characteristics		
Deaths	21.4	With Pressure Sores	3.3	Have Advance Directives		90.2
Total Number of Discharges		With Rashes	4.9	Medications		
(Including Deaths)	140			Receiving Psychoactive Drugs		73.8

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.2	86.4	1.10	88.2	1.08	87.3	1.09	88.8	1.07
Current Residents from In-County	78.7	85.0	0.93	88.5	0.89	85.8	0.92	77.4	1.02
Admissions from In-County, Still Residing	14.8	18.1	0.82	21.6	0.68	20.1	0.74	19.4	0.76
Admissions/Average Daily Census	240.7	199.9	1.20	187.2	1.29	173.5	1.39	146.5	1.64
Discharges/Average Daily Census	237.3	201.1	1.18	182.1	1.30	174.4	1.36	148.0	1.60
Discharges To Private Residence/Average Daily Census	100.0	83.1	1.20	76.7	1.30	70.3	1.42	66.9	1.49
Residents Receiving Skilled Care	100	95.8	1.04	96.7	1.03	95.8	1.04	89.9	1.11
Residents Aged 65 and Older	100	84.4	1.19	89.4	1.12	90.7	1.10	87.9	1.14
Title 19 (Medicaid) Funded Residents	31.1	61.2	0.51	48.4	0.64	56.7	0.55	66.1	0.47
Private Pay Funded Residents	45.9	13.7	3.34	31.2	1.47	23.3	1.97	20.6	2.23
Developmentally Disabled Residents	0.0	1.2	0.00	0.2	0.00	0.9	0.00	6.0	0.00
Mentally Ill Residents	44.3	30.0	1.47	34.7	1.28	32.5	1.36	33.6	1.32
General Medical Service Residents	9.8	23.2	0.42	23.5	0.42	24.0	0.41	21.1	0.47
Impaired ADL (Mean)	52.1	52.9	0.99	50.4	1.03	51.7	1.01	49.4	1.06
Psychological Problems	73.8	51.7	1.43	58.0	1.27	56.2	1.31	57.7	1.28
Nursing Care Required (Mean)	9.0	8.4	1.07	7.3	1.24	7.7	1.17	7.4	1.21